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# DEPARTMENT OF NURSING EDUCATION

IN CHARGE OF  
ISABEL M. STEWART, R.N.

## THE CLASSIFICATION OF NURSING SCHOOLS

Among a number of other pieces of work undertaken last year by the Committee on Education of the National League of Nursing Education was the working out of a suggestive basis for the grading or classifying of nursing schools. This is a matter which vitally concerns every training school and every nurse in the country and it is therefore desirable that there should be the fullest discussion of all the factors to be considered in determining the relative standing of any kind of nursing school.

The Education Committee would be glad if state and local leagues would make a special point of bringing this matter up for discussion as early as possible and send results in to Miss Gray, the chairman of the sub-committee, before the first of January. The following report by Miss Gray will make quite clear the purpose of the blank and the general method to be followed. A few changes have been made in the questionnaire as a result of discussion and questions sent in. A few of these reprints can be secured if requests are made at once.

## REPORT OF CLASSIFICATION COMMITTEE

We have reached a stage in our growth where some standard by which to classify nursing schools is as necessary to us as the standards set by the dictionary are to the student of English. If at some time in the future it is possible to have a book for handy reference that will enable the busy superintendent to classify her own school according to the accepted standards of the League, and at the same time to measure its strong and weak points impartially and accurately, it will probably prove a most effective weapon in the hands of those who are working for better schools and better educated nurses, which in time mean better care for the sick.

The sub-committee which consented to undertake this task did so with much reluctance (for it fairly bristles with difficulties), and a very strong conviction that the only classification that would meet our needs, and prove of value, would be one which was worked out from the assembling of information that expresses the ideas and ideals of women who are actually struggling with the problems of nursing schools, and who represent the different types of schools we find in our midst.

We want information from the small school that provides adequate experience by means of many affiliations, as well as the large school that finds all classes of cases within the walls of one institution, and from the private hospital that is not run for profit, as well as from the municipal hospital supported by public taxes. It is hoped that each individual will draw upon her own experience, and not necessarily allow her answers to be influenced by her present connection. In other words, we want the fullest coöperation of everyone in order that our study shall be as practical as possible, and shall represent the ideals of the League members, and not any one group.

The first task undertaken by this committee was to assemble data regarding the score cards used in various forms of work. We were familiar with the use of such cards for grading schools, colleges and hospitals, but were unprepared to find how extensively they are used for grading industrial plants and their varied output, as well as agricultural products.

After some study of the problem presented, the committee decided that the annual meeting of the National League furnished an unique opportunity for discussion, and we felt that the most effective way to get the consensus of opinion of the members was by means of a questionnaire, which it has been most difficult to limit to a reasonable length. We have tried to confine our questions to vital points and have therefore passed over many details that are of interest and importance, but not essential in the preliminary survey.

The plan was that each member attending the meetings would take this questionnaire away with her and would spend some time and thought in answering the questions, and then return to the chairman of the committee, at 132 East 45th Street, New York City. The answers have been rather slow in coming in, and it is urged that an effort be made to complete them before January 1st, 1921, in order that the committee may continue its work.

The answers to many of the questions hinge upon the standard set for a Grade A school which will be rated at 100 per cent. This makes the first question somewhat of a key question.

#### COPY OF QUESTIONNAIRE

During the war, when the Committee on Nursing of the Council of National Defense was trying to assign pupils to nursing schools in all parts of the United States, it was found extremely difficult to get information about these schools that was accurate, fair and trustworthy. It is probable that such information exists, but if it does it is widely scattered and not readily available for use. Moreover, when such information is wanted it usually is wanted promptly. Accordingly, a sub-committee appointed by the Committee on Education of the National League is attempting the task of working out something approximating

a score card to be used by the training school inspectors in various states so that we may in time assemble the information that will place a school automatically in one of four groups—i. e., A, B, C, D.

In order to make this as democratic as possible, the plan is to work out the score cards for the different groups from answers obtained from about three hundred schools representing various types in different parts of the country. For instance, it is proposed to build the standard for a Grade A school from the answers to the following questions, plus any suggestions that may be offered and prove of practical value.

1. Should Grade A include the leading schools now in existence, or should it set a standard for us to work up to? It is probable that many schools now in existence have some of the essentials that it will be decided to require of Grade A schools, but is it likely that any one will have all of them?
2. Should Grade B include the highest schools we now have or a second grade?
3. Should Grade C include second grade schools or average schools?
4. Should Grade D include average schools, or a poor grade?
5. Will four groups be enough, or would you include a fifth?
6. If you include a fifth, how designate?

(The following questions refer to Grade A. School.)

1. Should Grade A school have definite support other than just dependence on the hospital?
2. When not independent of the hospital in any other way, should it have a separate budget?
3. What type of hospital building? Fireproof? Meeting modern sanitary requirements?
4. What type hospital, General municipal? General endowed? Special, such as mental and children? Private: Self supporting? Run for profit?
5. What should be the average number of patients? What should be the minimum capacity? Public wards? Private rooms?
6. What services should it include and approximate time for each? (Before answering this, see question 9.)

	Male	Female	Time
Medical	{	Acute	
		Sub-acute	
		Chronic	
Surgical	{	Acute	
		Sub-acute	
		Chronic	
Infants.			
Children	{	Acute	
		Sub-acute	
		Chronic	
Venereal.			
Skin.			
Ear, eye, nose and throat.			
Specialling patients.			
Mental and nervous	{	Acute	
		Sub-acute	
Communicable.			

Out patient.

Operating room—Time.

Obstetrical { How long before delivery?  
How long after delivery?

Gynecological { Acute  
Sub-acute

Night duty—How much each year? How long at a time?

Social service.

Public health.

Affiliations.

Service

What records would you require of the affiliated school? What records would you consider it essential to submit to the affiliated school?

7. What preparation would you consider essential for the following members of the faculty of such a school, and what salaries adequate?

Principal and Superintendent of Nurses	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	
Assistant Superintendents	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	
Assistant Principal	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	
Instructor, Elementary Science	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	
Instructor, Practical Nursing	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	

How many hours should each instructor be required to teach weekly?

How many different subjects can one instructor do justice to? Should she have any other duties beside teaching?

Supervisors	Preparation	{ Academic Professional Postgraduate
	Experience	
	Salary	

Should other paid instructors be provided? Are doctors or outside lecturers paid? If so, how much? Should medical staff assist in teaching? If so, are they paid?

Head nurses	{	Preparation	{	Academic
		Experience		Professional
		Salary		Postgraduate
Do head nurses teach? If so, what subjects?				
Social director	{	Preparation	{	Academic
		Experience		Professional
		Salary		Postgraduate
Outline duties.				
Dietitian	{	Preparation	{	Academic
		Experience		Professional
		Salary		Postgraduate
Outline duties.				

How many hours of teaching first year? Second year? Third year?

8. How many and what type of instructors would you consider necessary for a school conducted in connection with a hospital of (a) 100 beds, (b) 200 beds, (c) 500 beds, (d) the number of beds you have decided as necessary for a Grade A school?

9. What length of training should be the minimum?

10. How long a preparatory course? (a) Daily hours in wards? (b) Daily hours in class?

11. Number of hours in hospital per day after preparatory course? Number of hours in classes? Time of day? Any classes at night? Number of hours in study? Number of hours in recreation? Time off duty in each week? Vacation each year? Allowance for sick time?

12. What curriculum should we consider as necessary? (a) Standard, (b) State, (c) Modified? Would you require introductory courses in public health? How long? Would you require introductory courses in institutional work? How long?

13. Would you require tuition fees? Would you furnish books? Uniforms?

14. Would you grant an allowance? How much?

15. What should be the educational requirement for entrance? What should be the age? What should be the health requirement? Would you require a physical examination after entrance? Would you require a physical examination during training? How often? When? Would you require any other credentials? From whom? What would you consider adequate provision for proper care of sick nurses?

16. What would you consider the minimum of class-rooms, laboratories and equipment for teaching? (a) Assembly rooms? (b) Lecture and demonstration rooms? (c) Laboratories—Science? Dietetics? Annual appropriation for equipment? (d) Library? Annual appropriation for books and magazines? (e) Reference reading or study rooms?

17. How many patients should one pupil be required to care for?

Medical	{	Acute
		Sub-acute
		Chronic

Surgical	{	Acute
		Sub-acute
		Chronic
Obstetrical	{	Before delivery
		After delivery
Gynecological	{	Acute
		Sub-acute
Infants.		
Services—		
Children	{	Acute
		Sub-acute
		Chronic
Venereal.		
Skin.		
Ear, eye, nose and throat.		
Mental and nervous.		
Communicable.		
Night duty.		
Specialling patients.		

18. What, from above, should be the general average of nurses to patients (Acute, Sub-acute, Chronic)?

19. What should be the proportion of graduate salaried head nurses to pupils?

20. What should be the proportion of supervisors to pupils?

21. What proportion of orderlies is required for assistance with care of male patients?

22. What proportion of orderlies is required for general utility service?

23. What proportion of maids for assisting with care of female patients?

24. What proportion of maids for cleaning, etc.?

25. What type of residence? Fireproof? Meeting modern sanitary requirements? Covered connection with hospital? (a) Number of sitting rooms? (b) Number of single bedrooms, number set basins, size? (c) Number of double bedrooms, number set basins, size? (d) Number of bathrooms (in proportion to those using them)? (e) Number of toilets (in proportion to those using them)? (f) Is there a laundry for nurses' use? (g) Is there a gymnasium? (h) Are special sleeping rooms provided for night nurses? (i) Is there a suitable place for recreation? (j) Is there a place for nurses to cook?

26. Meals served in hospital dining room or residence? (a) Round tables? (b) Number of pupils per table? (c) Service: cafeteria, maids, each one serves how many?

27. What type of government should be in force in a Grade A school? (a) Military, (b) Student, (c) Coöperative? (Please classify under one of three heads and explain briefly your conception of it.)

#### COMMITTEE OF THE ROCKEFELLER FOUNDATION FOR THE STUDY OF NURSING EDUCATION

In October, 1919, the Committee on Nursing Education organized for work with Professor C. E. A. Winslow as Chairman and Josephine Goldmark as Secretary. This committee appointed under the auspices of the Rockefeller Foundation, was originally asked to

study and report on education for public health nursing. Last spring its scope was extended to include a broader study of nursing education in general, including training for private duty nursing and institutional teaching and administrative positions. The committee now consists of eighteen persons, representing physicians, nurses and lay persons identified with public health work. They are: C. E. A. Winslow, M.D., New Haven, Chairman; Mary Beard, R.N., Boston; H. M. Biggs, M.D., New York; S. Lillian Clayton, R.N., Philadelphia; Lewis A. Conner, M.D., New York; David L. Edsall, M.D., Boston; Livingston Farrand, M.D., Washington, D. C.; Annie W. Goodrich, R.N., New York; L. Emmett Holt, M.D., New York; Julia C. Lathrop, Washington, D.C.; Mrs. John Lowman, Cleveland; M. Adelaide Nutting, R.N., New York; C. G. Parnall, M.D., Ann Arbor; Thomas W. Salmon, M.D., New York; Winford H. Smith, M.D., Baltimore; E. G. Stillman, M.D., New York; Lillian D. Wald, R.N., New York; W. H. Welch, M.D., Baltimore; Helen Wood, R.N., St. Louis; Josephine Goldmark, Secretary; Carolyn E. Gray, R.N., New York, and Anne H. Strong, R.N., Boston, Assistant Secretaries.

During the past year investigations have been carried on along two lines: first, to study public health nursing activities carried on by nurses and by persons other than nurses with a view to judging the calibre of the work, and the type of training best fitted to prepare for it; and second, to study the training afforded by hospital training schools and by graduate courses for public health nursing.

In both fields the investigation has necessarily been confined to representative intensive studies. Typical communities, rural, small-town, and city, have been reported on by field agents of the committee who have accompanied individual nurses on their rounds.

In the study of hospital training schools it has likewise been obviously desirable to choose representative institutions for intensive observation and study. The inquiry has been centered on all those factors in the school and in the hospital which are related to the training of student nurses. The method has been by detailed observation of the work in class and on the wards, by conference with individual students, instructors, and supervisors, and by a limited study of records.

In all its investigations, the committee has met a most generous response from the training schools, from public health organizations and from individuals, alike. It is hoped that a similar full response may be obtained to the inquiries which are to be directed to private duty nurses. The judgment of the committee as to the best types of nurses' education will in the end be based on an analysis of all these facts, gathered in the various fields of nursing.